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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: to be assigned
Applicant(s): Juang
Filed: herewith
Art Unit:
Examiner:
Title: Module Card Ejecting Mechanism

Attorney Docket No.: 003D.0104.U1(US)

Customer No.: 29,683

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Information Disclosure Statement

(37 C.F.R. §1.97(b))

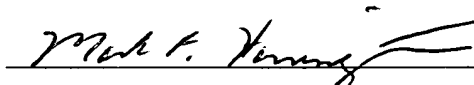
Sir:

The following information is being disclosed to the U.S. Patent and Trademark Office as information that may be material to the examination of the above-identified patent application.

Applicant's Attorney is aware of the documents listed on the enclosed Form PTO-1449. Copies of the non-US documents are enclosed with the Form PTO-1449 for the Examiner's use. The documents listed were cited in an International Search Report and Written Opinion issued in the parent International application. A copy of each Report is attached.

The filing of this Statement is not to be construed as a representation that a search has been made regarding the claimed invention (37 C.F.R. §1.97(g)) or that no other possible material information exists. In addition, the filing of this Statement is not to be construed to be an admission that the information cited in the Statement is, or is considered to be, material to Patentability (37 C.F.R. §1.97(h)).

Respectfully submitted,



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6/30/06

Date

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**INFORMATION DISCLOSURE
CITATION FORM FOR
PATENT APPLICATION
(FORM PTO-1449)
(Substitute)**

Docket No.: 003D.0104.U1(US)

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1AP20030527770 30 JUN 2004

U.S. PATENT DOCUMENTS

Examiner Initials	Document Number (Number-Kind Code)	Publication Date (MM-DD-YYYY)	Name of Patentee or Applicant	Class	Sub-class
	US-5,871,365	02-16-1999	Kajiura	439	159
	US-6,074,227	06-13-2000	Ho et al.	439	159
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FOREIGN PATENT DOCUMENTS

Examiner Initials	Document Number (Country Code-Number-Kind Code)	Publication Date (MM-DD-YYYY)	Name Of Patentee of Applicant	Translation? Yes/No/n/a
	EP 1 434 315 A1	06-30-2004	Hosiden Corporation	
	JP 2002 260524	09-22-2000	Japan Aviation Electronics Industry Ltd.	Abstract only
	- -			
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	- -			
	- -			
	- -			

OTHER DOCUMENTS (Author (Capitalize), Title, Date, Pages, Etc., if known)

Examiner's Signature:

Date Considered:

Initial if reference was considered, whether or not citation is in conformance with MPEP. Mark through citation if not considered.

Include a copy of this citation form with your next correspondence to the Applicant(s).